



Attorney Docket No. STK/070

Examiner : Hope A. Robinson
Group Art Unit : 1653
Applicants : Slobodan Vukicevic et al.
Application No. : 09/828,607 Confirmation No.: 5821
Filed : April 6, 2001
Title : REPAIR OF LARYNX, TRACHEA, AND OTHER
FIBROCARILAGINOUS TISSUES

Express Mail mailing label number EV615581847US

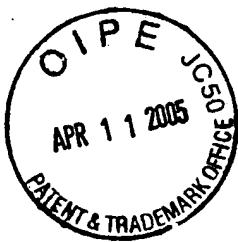
Date of Deposit April 11, 2005

I hereby certify that this paper/fee is being deposited with the United States Postal Service "EXPRESS MAIL POST OFFICE TO ADDRESSEE" service under 37 C.F.R. 1.10 on the date indicated above and is addressed to Hon. Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, Mail Stop AF.

Irene Keselman

Enclosures:

- 1) Transmittal Letter (in dupl.);
- 2) Petition for One-Month Extension of Time (in dupl.);
- 3) Amendment and Reply to Office Action;
- 4) Limited Recognition;
- 5) Check for \$120.00; and
- 6) Postcard.



PATENTS
STK-070

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Group Art Unit : 1653
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For : REPAIR OF LARYNX, TRACHEA, AND OTHER
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New York, New York
April 11, 2005

Mail Stop AF
Hon. Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith:

- ☒ Petition for one-month extension of time;
- ☒ Amendment and Reply to Office Action;
- ☒ Limited Recognition Under 37 C.F.R. § 10.9(b);
- ☒ Express Mail Certification;
- ☒ Check for \$120.00; and
- ☒ Postcard.

FEE FOR ADDITIONAL CLAIMS

- ☒ A fee for additional claims is not required.
- ☐ A fee for additional claims is required.

EV615581847US

The additional fee has been calculated as shown below:

CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	- 20	=	X \$50	= \$ 0.00
INDEPENDENT CLAIMS	- 3	=	X \$200	= \$ 0.00
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM			+ \$360	= \$ 0.00
TOTAL				<u>\$ 0.00</u>

- ☐ A check in the amount of \$_____ in payment of the filing fee is transmitted herewith.
- ☒ The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.
- ☐ Please charge \$_____ to Deposit Account No. 06-1075 in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

EXTENSION FEE

☒ The following extension is applicable to the Response filed herewith; ☒ \$120.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.17(a)(1);
☐ \$450.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.17(a)(2);
☐ \$1,020.00; extension fee for response within third month pursuant to 37 C.F.R. § 1.17(a)(3);
☐ \$1,590.00 extension fee for response within fourth month pursuant to 37 C.F.R. § 1.17(a)(4);
☐ \$2,160.00 extension fee for response within fifth month pursuant to 37 C.F.R. § 1.17(a)(5).

☒ A check in the amount of ☒ \$120.00;
☐ \$450.00; ☐ \$1,020.00; ☐ \$1,480.00;
☐ \$2,160.00 in payment of the extension fee is transmitted herewith.

☒ The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

☐ Please charge the ☐ \$110.00; ☐ \$420.00;
☐ \$950.00; ☐ \$1,480.00; ☐ \$2,010.00;
extension fee to Deposit Account No. 06-1075.
A duplicate copy of this transmittal letter is transmitted herewith.

Connie Wong

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Karen Mangasarian (Reg. No. 43,772)
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